U.S. Department of Education
Equity Assistance Centers (EAC) Program
Client Survey
For [Date] Through School Year [Year–Year]

Dear Respondent: Thank you for agreeing to complete this client satisfaction survey.

EACs provide technical assistance at the request of State education agencies, local education agencies, school boards, schools, and community organizations on equity issues related to race, national origin, sex, or religion.

Your response is essential to help assess and improve the Equity Assistance Centers program. We estimate the survey will take only about 20 minutes of your time. No individual respondents or organizations will be identified. If you have any questions, please contact Britt Jung, Group Leader, Technical Assistance and Insular Areas at britt.jung@ed.gov.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 20 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Education, 400 Maryland Ave., SW, Washington, DC 20210-4537 or email ICDocketMgr@ed.gov and reference the OMB Control Number 1880-0542 Note: Please do not return the completed Qualitative Feedback Survey to this address.

The Equity Assistance Center (EAC) that serves your region is:
[PREFILL THE NAME OF THE EAC FOR THIS RESPONDENT – BIG CAPS & BOLD]

1. **What is your role?** *Check (x) one box only.*

☐ State Education Agency Administrator

☐ Local Education Agency Administrator

☐ School Administrator

☐ School Board Member

☐ Teacher

☐ Community Member

☐ Family Member

☐ Other, please describe.

_____

_____

2. How frequently did you (or do you) interact with the EAC? *Check (x) one box only.*

☐ Daily

☐ Weekly

☐ 2-3 times a month

☐ Once a month

☐ Every 2-3 months

☐ 2-3 times a year or less

3. Please select the equity area(s) addressed by the EAC. *Check (x) all that apply.*

☐ Race

☐ Sex

☐ National Origin

☐ Religion

☐ Don't know

4. Why did your organization request assistance from the EAC? *Check (x) all that apply.*

☐ Improve school integration on the basis of race, sex, national origin, religion, and/or socioeconomic status (e.g., developing student assignment plans, developing clear diversity goals in enrollment, promoting socioeconomic diversity, and measuring socioeconomic status)

☐ Improve school safety (e.g., decrease incidents of violence, bullying, harassment on the basis of race, sex, national origin, and/or religion)

☐ Improve student participation (e.g., chronic absenteeism, drop-outs, disproportionality in gifted and talented programs)

☐ Improve student achievement and close achievement gaps (e.g., address course failures, equitable access to effective teachers)

☐ Improve student support systems (e.g., access to school-based counseling, specialized instructional support services, mentoring services, and/or other programs to address socio-emotional learning)

☐ Improve family/caregiver and community engagement (e.g., training on available school-based supports, facilitating forums) for all

☐ Don't know

☐ Other, please explain.   ↙

_____

_____

5. Did the EAC assist your organization in any of the following areas? *Check (x) all that apply.*

☐ Addressing inequities in access to effective teachers on the basis of race, sex, national origin, or religion → Go to 5(A)(i)

☐ Addressing inequities in identification, recruitment, and/or selection of students for participation in educational programs (e.g., ELL programs) on the basis of race, sex, national origin, or religion → Go to 5(B)(i)

☐ Addressing student isolation or disciplinary practices on the basis of race, sex, national origin, or religion → Go to 5(C)(i)

☐ Providing accessible and culturally responsive practices in instruction and assessment → Go to 5(D)(i)

☐ Providing accessible and culturally responsive school-based physical and mental health supports → Go to 5(E)(i)

☐ Providing open, safe, welcoming, and equally accessible spaces in both classroom and non-classroom settings → Go to 5(F)(i)

☐ Critically reflecting on beliefs and attitudes including bias, stereotypes, and prejudices about students and caregivers/families → Go to 5(G)(i)

☐ Engaging all parents, families, and/or community members regardless of their race, sex, national origin, or religion → Go to 5(H)(i)

☐ Other, please specify:

5(A) IF YES, I received assistance on: Addressing inequities in access to effective teachers on the basis of race, sex, national origin, or religion

5(A)(i) Did your awareness of this topic increase after receiving support from the EAC?

☐ Yes → Go to Question 5(A)(i)(a)

☐ No, I did not increase my awareness of this topic. Please explain ↙

_____

Go to Question 5(A)(ii)
☐Don't know → Go to Question 5(A)(ii)

5(A)(i)(a) IF YES: To what extent did your awareness increase on this topic after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(A)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(A)(ii)(a)
☐ No, I did not increase my knowledge on this topic. Please explain ↙

_____

Go to Question 5(A)(iii)
☐Don't know → Go to Question 5(A)(iii)

5(A)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(A)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? *Check (x) all that apply.*

☐Yes, my organization <u>developed</u> *new* policies or practices.
☐Yes, my organization <u>improved</u> *existing* policies or practices.
☐Yes, my organization <u>implemented</u> *new* or *improved* policies or practices.
☐No, my organization made no changes to policies or practices. Please explain:

_____

☐I don't know if my organization made any changes.

5(B) IF YES, I received assistance on: Addressing inequities in identification, recruitment, enrollment, and/or selection of students for participation in educational programs (e.g., admissions, ELL programs) on the basis of race, sex, national origin, or religion?

5(B)(i) Did your awareness of this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(B)(i)(a)
☐ No, I did not increase my awareness of this topic. Please explain
↙

_____
Go to Question 5(B)(ii)
☐Don't know → Go to Question 5(B)(ii)

5(B)(i)(a) IF YES: To what extent did your awareness increase on this topic after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(B)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(B)(ii)(a)
☐ No, I did not increase my knowledge on this topic. Please explain
↙

_____
Go to Question 5(B)(iii)
☐Don't know → Go to Question 5(B)(iii)

5(B)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(B)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? _Check (x) all that apply._

☐Yes, my organization developed _new_ policies or practices.
☐Yes, my organization improved _existing_ policies or practices.
☐Yes, my organization implemented _new_ or _improved_ policies or practices.
☐No, my organization made no changes to policies or practices. Please explain: ↙

_____

_____
☐I don't know if my organization made any changes.

5(C) IF YES, I received assistance on: Addressing student isolation or disciplinary practices on the basis of race, sex, national origin, or religion

5(C)(i) Did your awareness of this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(C)(i)(a)
☐ No, I did not increase my awareness of this topic. Please explain   ↙

_____
Go to Question 5(C)(ii)
☐Don't know → Go to Question 5(C)(ii)

5(C)(i)(a) IF YES: To what extent did your awareness on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(C)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(C)(ii)(a)
☐ No, I did not increase my knowledge on this topic. Please explain   ↙

_____
Go to Question 5(C)(iii)
☐Don't know → Go to Question 5(C)(iii)

5(C)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(C)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? *Check (x) all that apply.*

☐Yes, my organization <u>developed</u> *new* policies or practices.
☐Yes, my organization <u>improved</u> *existing* policies or practices.
☐Yes, my organization <u>implemented</u> *new* or *improved* policies or practices.
☐No, my organization made no changes to policies or practices. Please explain: ↙

_____
_____
☐I don't know if my organization made any changes.

5(D) IF YES, I received assistance on: Providing accessible and culturally responsive instruction and assessment

5(D)(i) Did your awareness of this topic increase after receiving support from the EAC?

☐ Yes → Go to Question 5(D)(i)(a)
☐ No, I did not increase my awareness of this topic. Please explain

↙

Go to Question 5(D)(ii)
☐ Don't know → Go to Question 5(D)(ii)

5(D)(i)(a) IF YES: To what extent did your awareness of this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(D)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

☐ Yes → Go to Question 5(D)(ii)(a)
☐ No, I did not increase my knowledge on this topic. Please explain

↙

Go to Question 5(D)(iii)
☐ Don't know → Go to Question 5(D)(iii)

5(D)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(D)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? *Check (x) all that apply.*
☐ Yes, my organization developed *new* policies or practices.
☐ Yes, my organization improved *existing* policies or practices.
☐ Yes, my organization implemented *new* or *improved* policies or practices.
☐ No, my organization made no changes to policies or practices. Please explain: ↙

☐ I don't know if my organization made any changes.

5(E) IF YES, I received assistance on: Providing accessible and culturally responsive school-based physical and mental health supports

5(E)(i) Did your awareness of this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(E)(i)(a)
☐ No, I did not increase my awareness of this topic. Please explain

↙

_____

Go to Question 5(E)(ii)
☐Don't know → Go to Question 5(E)(ii)

5(E)(i)(a) IF YES: To what extent did your awareness of this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(E)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

☐Yes → Go to Question 5(E)(ii)(a)
☐ No, I did not increase my knowledge on this topic. Please explain

↙

_____

Go to Question 5(E)(iii)
☐Don't know → Go to Question 5(E)(iii)

5(E)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(E)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? _Check (x) all that apply._

☐Yes, my organization <u>developed</u> _new_ policies or practices.
☐Yes, my organization <u>improved</u> _existing_ policies or practices.
☐Yes, my organization <u>implemented</u> _new_ or _improved_ policies or practices.
☐No, my organization made no changes to policies or practices. Please explain:

↙

_____

_____

☐I don't know if my organization made any changes.

5(F) IF YES, I received assistance on: Providing open, safe, welcoming, and equally accessible spaces in both classroom and non-classroom settings

5(F)(i) Did your awareness of this topic increase after receiving support from the EAC?

       ☐Yes → Go to Question 5(F)(i)(a)

☐ No, I did not increase my awareness of this topic. Please explain ↙

_____

Go to Question 5(F)(ii)

☐Don't know → Go to Question 5(F)(ii)

5(F)(i)(a) IF YES: To what extent did your awareness of this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(F)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

       ☐Yes → Go to Question 5(F)(ii)(a)

☐ No, I did not increase knowledge on this topic. Please explain ↙

_____

Go to Question 5(F)(iii)

☐Don't know → Go to Question 5(F)(iii)

5(F)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(F)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? *Check (x) all that apply.*

☐Yes, my organization <u>developed</u> *new* policies or practices.

☐Yes, my organization <u>improved</u> *existing* policies or practices.

☐Yes, my organization <u>implemented</u> *new* or *improved* policies or practices.

☐No, my organization made no changes to policies or practices. Please explain: ↙

_____

☐I don't know if my organization made any changes.

5(G) IF YES, I received assistance on: Critically reflecting on beliefs and attitudes including bias, stereotypes, and prejudices about students and caregivers/families

5(G)(i) Did your awareness of this topic increase after receiving support from the EAC?

       ☐Yes → Go to Question 5(G)(i)(a)
☐ No, I did not increase my awareness of this topic. Please explain   ↙

Go to Question 5(G)(ii)
☐Don't know → Go to Question 5(G)(ii)

5(G)(i)(a) IF YES: To what extent did your awareness of this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(G)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

       ☐Yes → Go to Question 5(G)(ii)(a)
☐ No, I did not increase my knowledge on this topic. Please explain   ↙

Go to Question 5(G)(iii)
☐Don't know → Go to Question 5(G)(iii)

5(G)(ii)(a) IF YES: To what extent did your knowledge of this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(G)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? *Check (x) all that apply.*

☐Yes, my organization <u>developed</u> *new* policies or practices.
☐Yes, my organization <u>improved</u> *existing* policies or practices.
☐Yes, my organization <u>implemented</u> *new* or *improved* policies or practices.

☐No, my organization made no changes to policies or practices. Please explain:

_____

_____

☐I don't know if my organization made any changes.

5(H) IF YES, I received assistance on: Engaging all parents, families, and/or community members regardless of their race, sex, national origin, or religion

5(H)(i) Did your awareness of this topic increase after receiving support from the EAC?

      ☐Yes → Go to Question 5(H)(i)(a)

☐ No, I did not increase my awareness of this topic. Please explain   ↙

_____

Go to Question 5(H)(ii)

☐Don't know → Go to Question 5(H)(ii)

5(H)(i)(a) IF YES: To what extent did your awareness of this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(H)(ii) Did your knowledge on this topic increase after receiving support from the EAC?

      ☐Yes → Go to Question 5(H)(ii)(a)

☐ No, I did not increase my knowledge on this topic. Please explain   ↙

_____

Go to Question 5(H)(iii)

☐Don't know → Go to Question 5(H)(iii)

5(H)(ii)(a) IF YES: To what extent did your knowledge on this topic increase after receiving support from the EAC?

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

5(H)(iii) Did your organization make any of the following changes to policies or practices after receiving support from the EAC? *Check (x) all that apply.*

☐Yes, my organization <u>developed</u> *new* policies or practices.

☐Yes, my organization <u>improved</u> *existing* policies or practices.
☐Yes, my organization <u>implemented</u> *new* or *improved* policies or practices.
☐No, my organization made no changes to policies or practices. Please explain: ↙

_____

_____

☐I don't know if my organization made any changes.

6. Did your organization receive assistance from the EAC on building inclusive leadership where stakeholders (school administrators, staff, families, students, and community members) participate in decisions affecting their school and community? *Check (x) one box only*

☐ Yes → Go to Question 6(A)
☐ No → Go to Question 7

6(A) IF YES: To what extent did your organization increase its capacity to build inclusive leadership where stakeholders (school administrators, staff, families, students, and community members) participate in decisions affecting their school and community after receiving assistance from the EAC? *Check (x) one box only.*

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

7. Did your organization receive assistance from the EAC on identifying and/or leveraging mutually beneficial relationships or partnerships within (e.g., among experienced and new teachers) or outside your organization (e.g., with mental health providers)? *Check (x) one box only.*

☐ Yes → Go to Question 7(A)
☐ No → Go to Question 8

7(A) IF YES: To what extent did your organization increase its capacity to identify and/or leverage mutually beneficial relationships or partnerships within or outside your organization after receiving assistance from the EAC? *Check (x) one box only.*

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

8. Did your organization receive assistance from the EAC on obtaining or leveraging tangible materials or systems (e.g., technology, funding)? *Check (x) one box only.*

☐ Yes → Go to Question 8(A)
☐ No → Go to Question 9

8(A) IF YES: To what extent did your organization increase its capacity to obtain and/or leverage tangible materials or systems after receiving assistance from the EAC? *Check (x) one box only.*

A Little	Somewhat	To a Moderate Extent	To a Great Extent
1	2	3	4
☐	☐	☐	☐

9. Based on your experience with the EAC, how likely are you to request additional technical assistance from the EAC?

Definitely will not	Probably will not	Might or might not	Probably will	Definitely will
0	1	2	3	4
☐	☐	☐	☐	☐

10. Based on your experience with the EAC, how likely are you to refer another organization to an EAC for technical assistance?

Definitely will not	Probably will not	Might or might not	Probably will	Definitely will
0	1	2	3	4
☐	☐	☐	☐	☐

11. Did your organization select services from the EAC over another service provider for any of the following reasons? *Check (x) "Yes" or "No" for each item.*

	Yes 1	No 2
a. Value	☐	☐
b. EAC reputation	☐	☐
c. Past experience with the EAC	☐	☐

d. Other — Please describe	☐	☐
_____ _____ _____		

12. Overall, I am very satisfied with the services the EAC provided (is providing) to my agency/organization.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
0	1	2	3	4
☐	☐	☐	☐	☐

13. Based on your experiences, what could be done to most improve EAC services?

_____

_____

_____

Thank you very much for your participation!

Dear Colleague:

On behalf of the U.S. Department of Education, I am writing to inform you that you have been selected to participate in a Client Survey for the Equity Assistance Centers (EAC) program. The Office of Elementary and Secondary Education (OESE) has commissioned the Federal Research Division of the Library of Congress to conduct the survey, which covers the 201x-201x school year. We use the survey results to report to Congress on the activities of the EACs and to inform the management of the program. Your response is essential to help assess and improve the program.

As you are aware, the EACs are authorized under Title IV of the Civil Rights Act of 1964. They provide training, planning, consultation, and other services, upon request, on issues related to equity in education to ensure that all children, regardless of race, sex, national origin, or religion have equal access to quality education and the opportunity to develop high academic skills.

Your response is very important to the U.S. Department of Education and to the EACs, and we appreciate the time and effort you are taking to provide it. The survey can be completed in about twenty minutes. Survey results will be reported in aggregated form, and no individual respondents or organizations will be identified.

Please complete each item and submit your completed form as indicated on the attached survey by xxx. If you have questions or comments about the survey items or data compilation procedures, please call xxx of the Library of Congress at (202) 707-2888 or e-mail xxx.

Thank you very much for your prompt response.

Sincerely,

Britt Jung
Group Leader
Office of School Support and Rural Programs

Equity Assistance Centers Program
Instructions to Identify Clients Who Received EAC Services

1. **Clients of the Equity Assistance Centers (EACs) are identified in the statute (1964 Civil Rights Act, Title IV) and regulations (34 CFR Part 272) that govern this program. They include:**
   - School boards, States, municipalities, school districts, public schools, or other governmental units legally responsible for operating a public school or schools in the EAC geographical service area.

   Note:
   - Identify clients only if the EAC actually provided services for them, through a plan for service that encompassed more than a single event.
   - Do <u>not</u> include (1) organizations as clients if the EAC only participated jointly in collaborative activities with them; (2) the U.S. Department of Education; or (3) consultants hired by the EAC to provide EAC services.

2. **Identify all clients that meet the following criteria:**
   - The clients received service(s) anytime during the period from **October 1, 201x through September 30, 201x**
   - The EAC provided services that included, but were not limited to: consultation, planning, technical assistance, training, professional development, workshops, conferences, and information dissemination activities. These services may have been delivered on-site, off-site, electronically, or through other means.

   Note:
   - Count a district as a client if the EAC developed a plan for services with district staff. Count a school as a client if the EAC developed a plan for services with school staff.
   - Do <u>not</u> list a client if it is unlikely that the client would recognize that the EAC provided the service, for example, if the activity was carried out jointly with other organizations and the EAC did not have a visible role.

3. **Generate a list of all client organizations that meet the criteria above in #1 and #2. For each organization on the list, provide information for your key contact person at that organization.**
   - Identify the organization's key contact person who worked most closely with the EAC in planning the services and who can give an accurate and unbiased assessment of the quality and usefulness of the EAC services provided and any results on the organization's policies and practices.

   - An organization should appear only once in your list of clients <u>unless</u> the EAC worked with more than one key contact person at that organization on more than one set of activities. If this is the case, and there is no one person who would know about all the services provided by the EAC, the EAC may submit a separate listing for each key contact person in the organization.

   - In the Excel spreadsheet, please:

1. Provide the name and position title for each contact person. Provide each contact person's <u>office</u> (not home): mailing address, phone number, and email address.
2. Provide the name of the organization.
3. Identify the type of organization in the last column.
4. Verify the contact information for each person, and then put an "X" in the first column.

Please submit your client list in the Excel spreadsheet to xx.xxx@ed.gov by September 30, 20xx.